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PTO/SB/01 (10-00)

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	PPC-827	
	First Named Inventor	K. M. Killeen et al.	
	COMPLETE IF KNOWN		
	Application Number	10/062,814	
	Filing Date	January 31, 2002	
	Group Art Unit		
<input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ADHESIVE PATTERN FOR THONG SANITARY NAPKIN
(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 01/31/2002 as United States Application Number or PCT International Application Number

10/062,814 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
10/040,575	November 1, 2001	Pending Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

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Number Bar Code
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AND

☐ Practitioner(s) named below:
Name

Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to James P. Barr at telephone number (732) 524-2826.

Direct all correspondence to: Customer Number ☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Kristy M.		Family Name or Surname KILLEEN	
Inventor's Signature <i>Kristy M. Killeen</i>		Date 03/05/02	
Residence: City Lawrenceville	State NJ	Country USA	Citizenship USA
Mailing Address 2313 Town Court North			
City Lawrenceville	State NJ	ZIP 08648	Country USA
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Pramod S.		Family Name or Surname MAVINKURVE	
Inventor's Signature <i>Pramod S. Mavinkurve</i>		Date 3/6/02	
Residence: City Princeton	State NJ	Country USA	Citizenship USA
Mailing Address 328 Dodds Lane			
City Princeton	State NJ	ZIP 08540	Country USA
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Melinda G.		Family Name or Surname CETTINA	
Inventor's Signature <i>Melinda G. Cettina</i>		Date 3/5/02	
Residence: City Robbinsville	State NJ	Country USA	Citizenship USA
Mailing Address 11 Trellis Way			
City Robbinsville	State NJ	ZIP 08691	Country USA



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NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Antonio Carlos Ribeiro		Family Name or Surname CARVALHO	
Inventor's Signature <i>[Signature]</i>		Date <i>3/05/2002</i>	
Residence: City Taubate, SP	State Brazil	Country Brazil	Citizenship Brazil
Mailing Address Rua Carolina Naresse 63			
City Taubate, SP	State Brazil	ZIP	Country Brazil
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Marcia Helena Teixeira		Family Name or Surname FAJOLLI	
Inventor's Signature <i>[Signature]</i>		Date <i>03/05/2002</i>	
Residence: City Sao Jose dos Campos, SP	State Brazil	Country Brazil	Citizenship Brazil
Mailing Address Rua Angelo Rodrigues Alves, 115			
City Sao Jose Dos Campos, SP	State Brazil	ZIP	Country Brazil
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Flavia Guimaraes		Family Name or Surname GUARAGNA	
Inventor's Signature <i>[Signature]</i>		Date <i>03/05/2002</i>	
Residence: City Pindamonhangaba, SP	State Brazil	Country Brazil	Citizenship Brazil
Mailing Address Rua Justiniano Antunes 25			
City Pindamonhangaba, SP	State Brazil	ZIP	Country Brazil

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DOCKET NO. PPC-827

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: K, M. Killeen et al.

Serial No.: 10/062,814

Art Unit: 3761

Filed : January 31, 2002

Examiner:

For : ADHESIVE PATTERN FOR THONG SANITARY NAPKIN

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Missing Parts, Commissioner for Patents, Washington, DC 20231 on

April 22, 2002

(Date of Deposit)

James P. Barr

(Name of applicant, assignee, or Registered Representative)

(Signature)

April 22, 2002

(Date of Signature)

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Washington, D.C. 20231

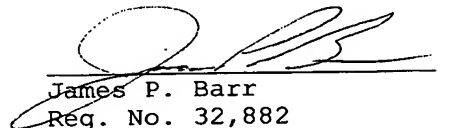
SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Kristy M. Killeen et al. entitled ADHESIVE PATTERN FOR THONG SANITARY NAPKIN attorney Docket No. PPC-827, to complete, pursuant to Rule 51, this application filed on January 31, 2002 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/PPC827/JPB in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/PPC827/JPB. This sheet is submitted in triplicate.

Respectfully submitted,


James P. Barr
Reg. No. 32,882
Attorney for Applicant(s)

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